Training

Clearly the transition from the existing system to the fully reengineered health care system will require extensive training. The following lesson plan is a sample of a training session designed by the Air Force to teach participants about the roles and responsibilities of the members of the primary care team.

LESSON PLAN

TOPIC: Roles, responsibilities, and relationships

Learning Objective(s): At the completion of this activity, participants should be able to understand the roles, responsibilities and relationships of the primary care management team concepts.

TIME	OUTLINE	TEACHING METHOD
1-	INTRODUCTION	
15 min.	Attention: Carpet bombing vs. laser guided bombing.	
111111.	Motivation: Everybody wins through job enrichment and more	
	active role in the health care of your patients.	
	Overview: Attendess will enhance delivery of core	
	Overview: Attendees will enhance delivery of care, access, and discussion of individual role in PCM parameter.	
	I. Critical Evolving PCM Role	
90	II. A. Enhance Delivery of Care	
min.	Providers Nurses	
	3. 4As	
	4. 4N/F	
	B. Enhancing Access	
	1. Providers	
	2. Nurses	
	3. 4As	
	4. 4N/F	
	C. Discussion of individual role in PCM parameter	
	1. Providers	
	2. Nurses	
	3. 4As 4. 4N/F	
	III. Enhance Delivery of Care	
	A. Providers	
	Ownership of your population disease	
	2. Continuity of care "cradle to care"	
	3. More time for direct patient care	
	4. Interaction with consultants-ultimate PCM	
	responsibility	
	Customer service	
	6. Conflict resolution	
	B. Nurses	
	 Critical holistic thinking Disease Management/case management 	
	(4A/N/F)	
	3. Triage – advice lines	
	4. Customer service	

- 5. Conflict resolution
- C. 4As
 - 1. Medical Records availability increase
 - a. Records available at time of appt
 - b. Forms in record and in order
 - c. 1480s in there
 - 2. Metrics collection
 - 3. Template management
 - 4. "The Office Manager"—what does this entail
 - 5. Customer service
 - 6. Conflict resolution
- D. 4N/F
 - 1. Counseling POI/SAM
 - 2. History taking POI/SAM
 - 3. Standards basic
 - a. Aero-medical disposition
 - 4. PHA
 - 5. Customer service
 - a. Internal
 - b. External
 - 6. Conflict resolution
- IV. Enhance Access
 - A. Providers
 - 1. More in 24/7
 - 2. More internal access
 - a. Communicate with nurse
 - b. Other team members
 - B. Nurses
 - Coordinate/communicate with 4A0/template management
 - 2. Triage
 - a. Day to day
 - b. Supervision of others
 - 3. Telephone consults/refills
 - a. PCM provider
 - b. Protocol managements
 - C. 4N/F
 - 1. Care extender protocols
 - 2. History (fast track guidelines)
 - 3. Preventive counseling
 - 4. System training (CHCS) orientation
 - 5. PHA/PHCA
 - D. 4As
 - 1. Template management
 - 2. Air Traffic control
 - 3. Communicate/Coordinate
 - 4. Interface with contractor
 - 5. Records availability/management
- V. Discussion of individual role in PCM Concept
 - A. Provider
 - 1. Philosophy away from episodic care
 - Know strengths/weaknesses of team members owing your team
 - 3. Medical role management
 - 4. Customer service

Nurse

	a. Oversight of PCM Team Process	
	 b. Medical Records management 	
	c. Customer Service	
	d. Conflict Resolution	
	B. 4N/F	
	 Education training in preventive services 	
	(population health/disease management	
	2. Know CFETP	
	Clinical tactical interface	
	a. Set the tone	
	 b. Key decision makers 	
	 c. Maintaining the pace 	
	d. Anticipate problems	
	C. 4A0s	
	 Become the Business Manager 	
	Data management	
	Key interface with customer	
	Customer service	
	Conflict resolution	
	CONCLUSION	
15	Summary: Everyone should have an awareness of their role in	
min.	enhancing delivery of care, improving access and	
	understanding multidisciplinary interdependence of their role	
	in the PCM Concept.	